

PTO/SB/17 (11-00)  
Approved for use through 10/31/2002. OMB 0851-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE  
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# FEE TRANSMITTAL for FY 2001.

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 110.00)

## Complete if Known

Application Number	09/204,888
Filing Date	03 DECEMBER 1998
First Named Inventor	ELDERING
Examiner Name	GRANT, CHRISTOPHER
Group Art Unit	2611
Attorney Docket No.	T702-00 (8887.3002)

## METHOD OF PAYMENT

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number **501535**  
Deposit Account Name **Expanse Networks, Inc.**

☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

☒ Applicant claims small entity status. See 37 CFR 1.27

2. ☐ Payment Enclosed:

☐ Check ☐ Credit card ☐ Money Order ☐ Other

## FEE CALCULATION

### 1. BASIC FILING FEE

Large Entity Code	Small Entity Code	Fee (\$)	Fee Description	Fee Paid	
101	710	201	355	Utility filing fee	0.00
106	320	206	180	Design filing fee	0.00
107	490	207	245	Plant filing fee	0.00
108	710	208	355	Reissue filing fee	0.00
114	150	214	75	Provisional filing fee	0.00

SUBTOTAL (1) (\$ 0.00)

### 2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
24	-58** = 0	9.00	0.00
3	-5** = 0	40.00	0.00
Multiple Dependent		135.00	0.00

Large Entity Code	Small Entity Code	Fee (\$)	Fee Description	
103	18	203	9	Claims in excess of 20
102	80	202	40	Independent claims in excess of 3
104	270	204	135	Multiple dependent claim, if not paid
109	80	209	40	** Reissue independent claims over original patent
110	18	210	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 0.00)

\*or number previously paid, if greater. For Reissues, see above


## FEE CALCULATION (continued)

Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee Description	Fee Paid	
105	130	205	65	Surcharge - late filing fee or oath	0.00
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	0.00
139	130	139	130	Non-English specification	0.00
147	2,520	147	2,520	For filing a request for ex parte reexamination	0.00
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	0.00
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	0.00
115	110	215	55	Extension for reply within first month	0.00
116	390	216	195	Extension for reply within second month	0.00
117	890	217	445	Extension for reply within third month	0.00
118	1,390	218	695	Extension for reply within fourth month	0.00
128	1,890	228	945	Extension for reply within fifth month	0.00
119	310	219	155	Notice of Appeal	0.00
120	310	220	155	Filing a brief in support of an appeal	0.00
121	270	221	135	Request for oral hearing	0.00
138	1,510	138	1,510	Petition to institute a public use proceeding	0.00
140	110	240	55	Petition to revive - unavoidable	0.00
141	1,240	241	620	Petition to revive - unintentional	0.00
142	1,240	242	620	Utility issue fee (or reissue)	0.00
143	440	243	220	Design issue fee	0.00
144	600	244	300	Plant issue fee	0.00
122	130	122	130	Petitions to the Commissioner	0.00
123	50	123	50	Processing fee under 37 CFR 1.17(q)	0.00
126	180	126	180	Submission of Information Disclosure Stmt	0.00
581	40	581	40	Recording each patent assignment per property (times number of properties)	0.00
146	710	246	355	Filing a submission after final rejection (37 CFR § 1.129(a))	0.00
149	710	249	355	For each additional invention to be examined (37 CFR § 1.129(b))	0.00
179	710	279	355	Request for Continued Examination (RCE)	0.00
169	900	169	900	Request for expedited examination of a design application	0.00
Other fee (specify)	(2) X Terminal Disclaimer under 37 CFR 1.20(d)				110.00

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 110.00)

## SUBMITTED BY:

Name (Print/Type) **Douglas J. Ryder**  
Signature 

Registration No. (Attorney/Agent) **43,073**

## Complete (if applicable)

Telephone **(215) 766-2100**  
Date **4/8/03**

**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

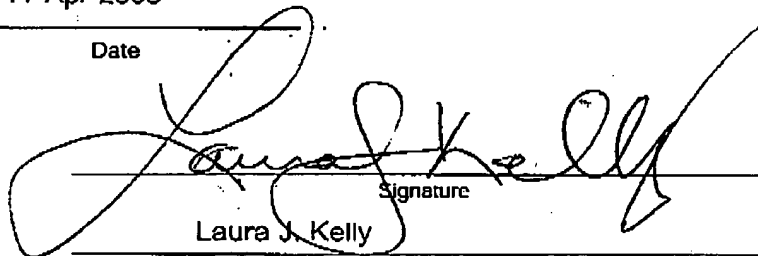
Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

PTO/SB/97 (08-00)  
Approved for use through 10/31/2002. OMB 0551-0031  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE  
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

### Certificate of Transmission under 37 CFR 1.8

I hereby certify that this correspondence is being facsimile transmitted to the  
United States Patent and Trademark Office

11-Apr-2003  
on \_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature

Laura J. Kelly

Typed or printed name of person signing Certificate

Note: Each paper must have its own certificate of transmission, or this certificate must identify each submitted paper.

- 1.) Transmittal (1p.)
- 2.) Reply to Official Action (7pp.)
- 3.) Terminal Disclaimer Appln. (35 U.S.C. 154) (1p.)
- 4.) Terminal Disclaimer Patent (35 U.S.C. 154) (1p.)
- 5.) Fee Transmittal (1p.)

Burdun Hour Statement: This form is estimated to take 0.03 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Official

Please type a plus sign (+) inside this box → ☒

PTO/SB/21 (08-00)

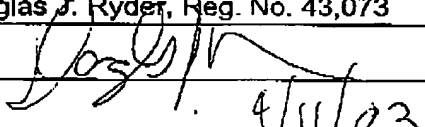
Approved for use through 10/31/2002. OMB 0851-0031

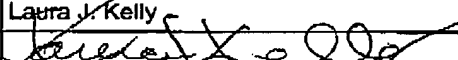
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing) <b>CUSTOMER NUMBER</b> 27832	<b>Application Number</b>	09/204,888	
	<b>Filing Date</b>	03 DECEMBER 1998	
	<b>First Named Inventor</b>	ELDERING	
	<b>Group Art Unit</b>	2611	
	<b>Examiner Name</b>	GRANT, CHRISTOPHER	
<b>Total Number of Pages in This Submission</b>	11	<b>Attorney Docket Number</b>	T702-00(8887.3002)

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input checked="" type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
<input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<b>Remarks</b>	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Douglas J. Ryder, Reg. No. 43,073
Signature	
Date	4/11/03

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office Fax No. (703) 872-9314 on this date: 11-APR-2003			
Typed or printed name	Laura J. Kelly	Signature	
		Date	11 April 2003

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.